723 W. Ala	or's Name Address eights II 60005 Phone #	143290000235 -12/01/97- ****122.5 Office Use Only	92091 -01117004
CORPORATION NAM	IE(S) & DOCUMENT NUMB	ER(S), (if known):	
2(Corporatio		ment #) ment #)	
4. (Corporation	n Name) (Docu	iment #)	
	ick up time Photocopy	Certified Copy Certificate of Status	SECRETARY OF INVISION OF CORP 97 DEC - 1 AM
NEW FILINGS	AMENDMENTS		F STAT
Profit	Amendment		3 5 S
NonProfit	Resignation of R.A., Officer/ Directo	Dr .	int
Limited Liability	Change of Registered Agent	-	12/2
Domestication	Dissolution/Withdrawal		12/2
Other	Merger		51 m
OTHER FILINGS Annual Report	REGISTRATION/F QUALIFICATION	,	
Fictitious Name	Foreign		-
Name Reservation	Limited Partnership		
	Reinstatement	and the second	
	Trademark	. *	
	Other		
		Everniner's Initials	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. GLS Composites Distribution Corp. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATED")	TION" or words or
abbreviations of like import in language as will clearly indicate that it is a corporation instead or partnership if not so contained in the name at present.)	of a natural person
2. Illinois (State or country under the law of which it is incorporated) 3. 36-41867	722 ber, if applicable)
(State or country under the law of which it is incorporated) (FEI number 1)	ber, if applicable)
4. October 6, 1997 (Date of incorporation) 5. perpetual (Duration: Year corp. will cease to exist	•
4. October 6, 1997 (Date of incorporation) (Duration: Year corp. will cease to exist	st or "perpetual")
6. <u>December 1, 19</u> 97	S DIVI
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.	SECRE DIVISION 97 DEC
7. 723 Wa Algonquin Rda	r ≒≅¬
	ILED STA
(Current mailing address)	_ ယ ⊒Ξ
Wholesale distribution of composite materials and all lawful acts and in furtherence of those purposes	d activities
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	
9. Name and street address of Florida registered agent:	
Name: CT CORPORATION SYSTEM	
Office Address: c/o C T Corporation System, 1200 South Pine Island Road	
Plantation Florida,33324	
(Zip Code)	
10. Registered agent acceptance: Having been named as registered agent and to accept service of process for the above stated con	

designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

	CT CORPORATION SYSTEM			
	(Registered agent's signature) (Officer)			
(FL - 2189 - 9/23/97)	ANNE E. DIAMOND - ASSISTANT SECRETARY (Type Name and Title of Officer)			
(1°L * 2109 - 3/23/91) CT System	(Type Name and Title of Officer)			

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and addresses of officers and/or directors:

Secretary: Nancy Dehmlow_

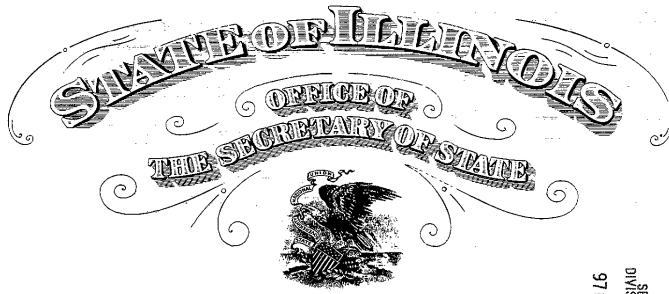
Address: _

A.	DIRECTORS
	Chairman: Steven La Debmlow
	Address: 723 Wa Algonquin Rda
	Arlington Heights, IL 60005-4432
	Vice Chairman: _NA
	Address:
	Director: Nancy Dehmlow
	Address: Same
	Director: David Pr Smith, Jrr
	Address: 225 Wr Randolph, Suite 6C
	Chicago, IL 60606
B.	OFFICERS
	President: Steven La Dehmlow
	Address: 723 Wa Algonquin Rda
	Arlington Heights, IL 60005-4432
	(s) Vice President: Leon Garoufalis : C. Frederick Rake
	Address: 723 Wa Algonquin Rda
	Arlington Heights, IL 60005-4432
	Ariington Heights, IL 60005-4432

Treasurer: _	John Ra Walles
Address:	Same
NOTE: If necessary, you and/or directors.	u may attach an addendum to the application listing additional officers
13. Mancy Actualo (Signature of Chairma application)	من an, Vice Chairman, or any officer listed in number 12 of the
14. Nancy Dehmlow, Co	rporate Secretary ne and capacity of person signing application)

DIVISION OF BORPORATIONS
97 DEC - | AM 8: 31

File Number_5961-089-9



To all to whom these presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois,



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ny	hand	and	cause	to be	affixed	the S	Great Sei	al of
. ,	CD	a du					7 4 1111	

the State of Illinois this ______14TH

day of ____NOVEMBER A.D., 19 97

George & Ryan
SECRETARY OF STATE